Floor Debate

H.R. 2086

OFFICE OF NATIONAL DRUG CONTROL POLICY REAUTHORIZATION ACT OF 2003 -- (House of Representatives - September 30, 2003, 2:08pm)

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Mr. SOUDER. Mr. Speaker, I move to suspend the rules and pass the bill (H.R. 2086) to reauthorize the Office of National Drug Control Policy, as amended.

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from Indiana (Mr. *Souder*) and the gentleman from Maryland (Mr. *Cummings*) each will control 20 minutes.

The Chair recognizes the gentleman from Indiana (Mr. Souder).

GENERAL LEAVE

Mr. SOUDER. Mr. Speaker, I ask unanimous consent that all Members may have 5 legislative days to revise and extend their remarks on the bill under consideration.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Indiana?

There was no objection.

Mr. SOUDER. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, the abuse of illegal narcotics and its silent, everyday impact on the health and safety of families and the stability of every community across the country continues to be one of the most pressing issues facing the United States. This bill, introduced by myself and the gentleman from Virginia (Mr. *Tom Davis*), the distinguished chairman of the full committee, is a forceful and bipartisan recommitment to our diverse national efforts to control drug abuse and to renew our support for a strong Office of National Drug Control Policy, to plan and coordinate the President's strategy to measurably reduce drug use by American youth and to control drug abuse and its consequences.

Mr. Speaker, most people driving on two-lane highways throughout the farmland of northeast Indiana would probably find it hard to believe that

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the plague of illegal narcotics hits home even there, but drug use and abuse is not unique to the big cities on the coasts. In 1996, Indiana law enforcement knew of only a single methamphetamine lab in the entire State. Only 5 years later, there were 499. That number dropped to 375 in 2002, but it is still an indication of the kinds of challenges places like Indiana face when it comes to illegal drugs.

Meth is not the only problem in Indiana. Fort Wayne is not a huge city, about 225,000, but there have been some huge cocaine busts there this year. This summer alone, two separate stings in Fort Wayne yielded 50 pounds of cocaine with a street value of \$2.3 million. We thought cocaine was nearly gone. We were wrong.

Mr. Speaker, almost half of the 12th graders in Indiana say they have used marijuana in the last year. Almost 9 percent say they have used powdered cocaine; 15 percent have used methamphetamines, but that is not the worst of it. Almost four in 100 sixth graders in Indiana say they have used marijuana in the last year. One in 200 have used powdered cocaine. These are 11- and 12-year-olds.

Consequently, one might ask, is there any point in fighting this battle at all? I am frequently asked whether we believe we can ever completely eliminate illegal drug use. The simple answer to that question is no. We cannot eliminate sin. But that does not mean we cannot and should not try, any more than we would give up on spouse abuse or child abuse. It does mean that we can make a difference in some cases.

The current administration has made a real effort to fight the scourge of illegal drugs, and that effort has shown results. Usage statistics that peaked in the late 1990s are now making a slow but steady decline, both nationwide and in my home State of Indiana. The numbers I cited above are too high, but they are improvements over statistics just a few short years ago.

What does that mean? That means there is a long fight ahead, but things are far from helpless. We can make a difference in people's lives, and that is why this bill is so important. This bill does not and cannot address each of the many specific national programs involved in our coordinated strategies to reduce demand for illegal drugs, the prevention and treatment, reduce the supply of narcotics through source-country programs, and interdiction and to disrupt and dismantle drug trafficking organizations and control the consequences of drug-related crime through coordinated law enforcement. The details of these programs continue to be dealt with by each of the separate authorizing committees of jurisdiction. It does, however, provide a cornerstone and ensure that these programs will be coordinated and effective through the broad guidance and coordination of the Office of National Drug Control Policy on behalf of the President.

The legislation reauthorizes ONDCP and its programs for 5 years. It makes some significant revisions to current law that will enhance the effectiveness and accountability of the National Drug Control strategy and its programs, streamline and simplify the process for its development, and provide increased flexibility to the ONDCP Director to respond to changing circumstances.

For example, we have replaced an inflexible legal requirement for a bloated 5-year strategy, guided by pages of outdated statutory mandates, with a flexible and responsive annual strategy that still follows the same basic principles to ensure a comprehensive and responsible drug strategy. We have also worked in many areas to improve performance

measurement for the annual strategy, Federal drug control programs, ONDCP programs, and even some private sector efforts to ensure that these programs will be effective and accountable. For example, we are now requiring that the director conduct a specific evaluation of the performance of each Federal agency in carrying out its responsibilities under the strategy each year and have mandated, for the first time ever, that a uniform system be developed to evaluate the effectiveness of the drug treatment programs in the United States

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The bill also provides for direct evaluation of the effectiveness of the media campaign in its individual ads.

Another key theme of the bill is our efforts to ensure that ONDC programs, most notably the HIDTA program and the media campaign, remain directed to their original intent and purpose in areas where our oversight activities have clearly demonstrated some lack of focus.

Finally, the bill is intended to ensure that the Federal Government maintains appropriate attention and resources directed to drug control, which has recently too often been subjugated to other purposes and policies.

This bill is a true bipartisan effort passed by unanimous vote in subcommittee and authorizing subcommittee, and by voice vote in the full committee, and represents the outcome of ongoing consultation and discussions with the minority.

The bill contains a complete text of the Dawson Family Community Protection Act that was introduced by the distinguished ranking member of the subcommittee, the gentleman from Maryland (Mr. *Cummings*), to address witness and community protection initiatives in the wake of the tragic death of the Dawson family in Baltimore at the hands of violent drug dealers.

The bill reported from the committee also contains a number of items requested by the gentleman from California (Mr. *Waxman*), the distinguished ranking member of the full committee, many of which reflect a clear bipartisan agreement that the media campaign should not be used for political purposes.

The bill also contains many suggestions from Members on both sides of the aisle including the work of the gentleman from Ohio (Mr. *Portman*) on the media campaign and changes to the current law requested by Director Walters in the administration.

It incorporates suggestions and ideas from key outside groups including the Community Anti-Drug Coalitions of America, drug treatment providers, the Partnership for Drug Free America, and members of the Federal, State, local and tribal law enforcement

participating in the HIDTA and CTAC programs, most notably the Drug Enforcement Administration.

While no one is necessarily completely happy with this bill, the final result was a bill that achieved nearly unanimous bipartisan support in the committee. This is a strong bipartisan bill to send to the other body.

Mr. Speaker, I reserve the balance of my time.

Mr. CUMMINGS. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, I rise in support of H.R. 2086, the Office of National Drug Control Policy Reauthorization of 2003.

Mr. Speaker, there is no greater problem in America than drug abuse. Illegal drugs contribute to an estimated 50,000 deaths in the United States each year. Nineteen thousand of these deaths are a direct result of illegal drug use.

According to the National Household Survey on Drug Abuse, 16 million Americans used an illegal drug on at least a monthly basis in 2001, including 6.1 million who needed treatment. In Baltimore City alone there are some 50,000 people addicted to drugs.

Most crime in the United States has an illegal drug nexus; and most of the prisoners sitting in the United States' prisons, jails, and detention facilities are there because of illegal drug activity.

These facts paint an ugly picture of the impact of drugs on American society; but they do not begin to describe the tragic harm done to individuals, families, and communities by drugs and drug-related crimes. In neighborhoods in Baltimore and Howard counties, I cannot escape seeing every day the devastating, destructive impact that drugs and drug-related crime, including violent crime, exact on communities. So it is with great seriousness that I approach this legislation reauthorizing the Office of National Drug Control Policy and related drug control programs.

The Office of National Drug Policy plays a central role in shaping and coordinating our Nation's policy and programs relating to illegal drugs. Established in 1988 and last reauthorized in 1997, ONDCP has the lead responsibility in the executive branch for establishing policies, priorities, and objectives relating to the demand for, and the supply of, illegal drugs in the United States.

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The director of National Drug Control Policy, or the drug czar, will have strong influence over the shape, direction, and implementation of Federal drug policy by certifying the drug control budgets of Federal departments and agencies that contribute to the national drug control strategy.

In addition to its policy and coordination functions, the ONDCP directly administers the High Intensity Drug Trafficking Areas program, the National Youth Anti-Drug Media Campaign, the Counterdrug Technology Assessment Center, and the Drug Free Communities program. Each of these programs plays an important role in implementing the national drug control strategy's goal of preventing drug use before it starts, healing America's drug users, and disrupting the market for illegal drugs.

H.R. 2086 would reauthorize for 5 years not only the Office of National Drug Control Policy, but also the HIDTA program, the CTAC, and the media campaign. And I believe that the office and these programs should be reauthorized.

This bill is not perfect, and I would agree with Mr. *Souder* that no one is completely happy with it. It is not the bill that I would have written. I know that some of my Democratic colleagues have strong concerns in certain areas, and I share some of those concerns. But we have worked in the Committee on Government Reform to make this bill better than it was. And through bipartisan negotiations with the gentleman from Virginia (Mr. *Tom Davis*), chairman of the drug control policy subcommittee, and the gentleman from Indiana (Mr. *Souder*), the gentleman from California (Mr. *Waxman*) and I were able to make significant improvements in key areas.

In particular, my colleagues who serve on the Committee on the Judiciary have raised legitimate concerns about language in the bill prohibiting the use of High Intensity Drug Trafficking Area program funds for treatment and prevention. The gentleman from California (Mr. *Waxman*) and I have tried over the past several weeks to address this concern with Chairman *Davis* and Chairman **SOUDER**.

The majority and ONDCP were not receptive to ideas we proposed that would have allowed additional HIDTAs to establish new treatment initiatives. We were able to achieve, however, an agreement to return to lift the restriction on HIDTA funds used for prevention, and we will continue to work through conference to restore the ability of HIDTAs that already have limited treatment programs to continue their treatment initiatives.

I hope that eventually we will see fit to allow additional HIDTAs the opportunity to implement new treatment initiatives as part of a strategy to reduce the public safety threat posed by offenders who use drugs and commit drug related crimes, including violent crimes.

I would point out that the Washington-Baltimore HIDTA's innovative use of treatment as a crime control tool in direct support of law enforcement initiatives has resulted in substantially reduced recidivism and rearrest

rates for offenders who have participated in HIDTA-funded treatment programs. In other words, our HIDTA law enforcement efforts are more effective because they are linked with HIDTA-funded treatment initiatives that are specifically designed to support them. Other HIDTAs should have the ability to invest in this approach which shows that

law enforcement and treatment work best when they are pursued in a closely coordinated fashion

Our negotiations with the majority also resulted in the elimination of a provision that would have opened the door to partisan political use of a national anti-drug media campaign with respect to anti-legalization efforts by the ONDCP director. As a result of our negotiations, the current bill would, one, maintain the existing prohibition on partisan political use of the media campaign; two, bar the use of media campaign funds to support advocacy against or in favor of any candidate, ballot initiative, or legislative or regulatory proposal, even if the candidate or measure is not partisan in nature; and finally absolutely prohibit the appearance of highly visible Federal officials in media campaign advertising.

Together, these provisions reflect a bipartisan agreement that the media campaign should place its focus on the goal of preventing youth drug use and that it should stay out of the business of influencing elections and legislative or regulatory proposals involving medical marijuana or any other extraneous issue.

The current bill also does not contain a provision that sought to punish State and local law enforcement in high-intensity drug trafficking areas in which States have adopted medical marijuana laws. The bill before us does include H.R. 1599, the Dawson Family Community Protection Act, legislation I introduced in response to one of the most tragic drug-related crimes in memory. The bill commemorates the lives of a courageous mother and a devoted father and five precious children who were senselessly murdered when their home was set ablaze in the middle of the night on October 16 of last year, apparently in retaliation for Angela Dawson's repeated complaints to police about drug distribution in her East Baltimore neighborhood.

This legislation would direct the drug czar to fund HIDTA initiatives aimed at increasing neighborhood safety and facilitating witness cooperation in communities ravaged by rampant drug trafficking activity and related violence.

I thank the gentleman from Indiana (Chairman **SOUDER**) again for his cosponsorship of H.R. 1599 and for including it in this reauthorization package.

Amendments that I offered and were adopted with the gentleman from Indiana's (Chairman **SOUDER**) support in subcommittee were slightly modified in full committee but remain mostly intact. This bill says the director must ensure through his budget certification authority that the administration's proposed funding of drug treatment programs will be adequate to enhance Federal treatment programs and capacity. Most of our States are suffering through fiscal crises, and cutbacks in State funding for drug treatment are widespread. Maintaining and expanding access to treatment on demand despite this economic trend is indeed vital.

With that, Mr. Speaker, I would like to thank the gentleman from Virginia (Mr. *Tom Davis*), the gentleman from Indiana (Chairman **SOUDER**), and the gentleman from California (Mr. *Waxman*) for their cooperation of collaborative approach in working with

us to resolve the matters of sharpest disagreement between the majority and the minority. I would also like to commend the gentleman from California (Mr. *Waxman*), ranking member, again for his leadership in representing the interests of the minority in this legislation and concerning a multitude of other issues that have come before the Committee on Government Reform and this great House.

I urge my colleagues to support this bill.

Mr. Speaker, I reserve the balance of my time.

Mr. SOUDER. Mr. Speaker, I yield 4 minutes to the distinguished gentleman from Florida (Mr. *Mica*), the former chairman of the subcommittee.

Mr. MICA. Mr. Speaker, I thank the gentleman for yielding me this time.

Mr. Speaker, I am pleased to rise in support this afternoon of one of the most important reauthorization pieces of legislation that will be addressed by this Congress, and that is the reauthorization of the Office of National Drug Control Policy.

Unfortunately, this is an issue that sometimes gets shoved below the radar screen in Congress and in our society, but I can tell the Members that there are very few social issues facing this Nation like the problem of illegal narcotics. In the latest report I have, the deaths that were drug related in this country in the year 2000, this is 3 years old, were 19,698. That is almost 54 human beings, 54 citizens in our country that die from drug-related deaths each day in the United States, an incredible number. And that is not to mention those who lose their lives such as the tragic death of those who were murdered in a drug-related crime in Baltimore, the Dawson family. Drug deaths now exceed homicides in the United States, and I would venture to say that nearly half of the homicides in the United States are drug related.

One of the issues that has been raised if this reauthorization is putting more money in treatment, and when I was chairman I supported a good balanced

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approach, and I think the gentleman from Indiana (Mr. *Souder*) and the gentleman from Maryland (Mr. *Cummings*) have tried to do that, and certainly the administration has. We have to understand that in the previous fiscal year 2002, the Federal Government spent nearly half, 45 percent, of all of its drug control policy budget on treatment and prevention. And it is not always how much we spend. It is very important how we spend that money, that it is spent effectively.

[Time: 14:30]

If we have learned nothing else in our experience over the years on this major social problem facing us, it is that a balance of education and prevention, of treatment, of

interdiction, of enforcement, and all of these elements put together in a balanced approach will make a difference. That is why this is a good, balanced approach.

We have seen what has happened when we have good enforcement and when we do not have good enforcement. The gentleman from Maryland (Mr. *Cummings*) has experienced that himself in Baltimore, one of our Nation's great cities, where the death toll was way over the 300 mark and they had lax enforcement. Mayor O'Malley went in, with the guidance of the gentleman from Maryland (Mr. *Cummings*), and with attention from the Federal Government and others, we have reduced the tragedy of deaths in that city.

We saw in New York City under the Giuliani plan deaths and homicides exceeded 2,000 in New York City. With a tough enforcement plan, that was reduced to between 600 and 700; and we still see the results of that tough enforcement. So we cannot make the mistake of imbalancing our approach, and that is why this is a good approach.

Mr. Speaker, I want to salute the chairman and ranking member. The President of the United States has taken a personal interest in the leadership of John Walters, the head of the Office of Drug Control Policy. They have a plan. It is working, it is effective, and it is a balanced approach and the right approach.

So, Mr. Speaker, I urge my colleagues to pass this important reauthorization.

Mr. CUMMINGS. Mr. Speaker, I yield 3 minutes to the distinguished gentleman from Illinois (Mr. *Davis*), a member of the subcommittee.

Mr. DAVIS of Illinois. Mr. Speaker, I want to commend the gentleman from Indiana (Chairman **SOUDER**) and the gentleman from Maryland (Ranking Member **CUMMINGS**) for the tremendous amount of work that has gone into the development of this legislation. In addition to that, I want to commend them for the overall work that has been done on this issue. We have attended hearings in many places throughout the country, well attended, as an indication of the tremendous amount of interest that people have in one of the most pernicious issues facing our society.

Out of respect for the bipartisan efforts that have taken place to try and reach agreement, I am very pleased that this legislation is on the floor. I am in agreement with those who suggest that not enough emphasis, though, is placed upon treatment. While all of the components of trying to wrestle with the drug problem are necessary and essential and while they must be balanced, I, for one, believe that we need to place more emphasis and put more resources into treatment for those individuals who are, in fact, addicted. As a matter of fact, I am a proponent of what I call treatment on demand. That is, whenever a person who is addicted presents himself or herself seeking treatment, they ought to be able to receive it.

I am also concerned that in this country, while it is not necessarily a part of this legislation or covered in this bill, that there are individuals who are denied the opportunity to receive a Pell grant to go to college because they have been convicted of a

drug offense. While that may seem rational and logical and wholesome and healthy and good because there are never enough resources to go around for everybody in our country to receive what they need, I think there are some situations where, rather than aiding the situation and helping it to change, that we actually retard the growth and development of individuals. Or the fact that there are individuals who, when convicted of drug offenses, can be denied food stamps. While, again, that does not diminish in any way the work that this subcommittee has done or the work that the full committee has done, those are realities of our society and realities of our times and issues that I think must be addressed.

Notwithstanding that, I commend the gentleman from Virginia (Chairman *Davis*), the gentleman from California (Ranking Member **WAXMAN**) and, again, the gentleman from Indiana (Mr. *Souder*) and the gentleman from Maryland (Mr. *Cummings*) for the work that they have done.

Mr. SOUDER. Mr. Speaker, I yield 5 minutes to the distinguished gentleman from Virginia (Mr. *Tom Davis*), the chairman of the full committee.

Mr. TOM DAVIS of Virginia. Mr. Speaker, first of all, let me thank the gentleman from Indiana (Chairman **SOUDER**) for his leadership on this issue, as he has made a career of this since he came to Congress, and to his ranking member, (Mr. *Cummings*) of Maryland. I appreciate them working together. To my ranking member on the full committee, the gentleman from California (Mr. *Waxman*), we appreciate his input here to reach this compromise we have here today.

Since its inception in 1988, the Office of National Drug Control Policy has been the cornerstone of drug policy in America, improving the lives of all Americans by reducing the presence of drugs in our society. This office has been producing the results our Nation needs: Teen drug use is on the decline, and that is just one of many positive advancements which have been made by ONDCP in the last couple of years.

The many positive signs and trends that Director Walters reported in this year's National Drug Control Strategy clearly demonstrate the difference the office can make when strong and effective leadership is merged with sound policy.

Drug use and abuse is a national crisis that affects the health of our citizens and, in turn, our country. To win the war on drugs, we need to address the problem of drugs in our society from every angle. This legislation gives ONDCP the appropriate resources to stop drug use before it starts, to heal drug users, and disrupt drug markets.

We all know that drugs affect people from all walks of life. Rich, poor, whatever race, addiction does not discriminate. A strong national drug policy is in the interests of every American.

Mr. Speaker, the bill we bring to the floor today is bipartisan in the best sense of the word. It is the product of careful negotiation and strong bipartisan agreement. In crafting this important piece of legislation, we aimed to provide the best possible support for the

administration and Director Walters in implementing the President's strategy. We sought to make ONDCP more efficient by reducing outdated reporting and structural requirements that are in the current law. We also gave significant attention to reforms of the Media Campaign and the HIDTA program to ensure that they are effective and true to their original aims. Both of these programs have grown in ways that were not originally intended, and the bill reflects the desire to ensure that the programs remain accountable and dedicated to their core purposes.

Again, I want to thank the gentleman from Indiana (Chairman **SOUDER**) and the subcommittee ranking member, the gentleman from Maryland (Mr. *Cummings*), and my full committee counterpart, the gentleman from California (Ranking Member **WAXMAN**) for their leadership, dedication, and hard work on this authorization legislation. I am happy that we could reach a bipartisan agreement on this bill. It is too important to play politics with, and there is no place for partisanship in protecting our children against drugs. This bipartisanship was reflected in the unanimous vote to pass the bill out of our committee.

Mr. Speaker, I am confident that we have put together a cohesive, effective piece of legislation to maintain and provide ONDCP with the necessary tools to reduce illicit drug use, manufacturing, and trafficking, and drug-related crime and violence, and drug-related health consequences.

Mr. CUMMINGS. Mr. Speaker, I yield 5 minutes to the distinguished gentlewoman from California (Ms. *Waters*), a Member who has worked a long time on the drug issue and the problems of drugs in this country and abroad.

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Ms. WATERS. Mr. Speaker, I would like to thank the gentleman from Maryland (Mr. *Cummings*) for yielding me this time. I know how hard he and others have worked on the bill, and I certainly know what they are attempting to do. I just feel as if I would be derelict in my duty if I did not speak to some of the issues that I have spent so many years working on. The gentleman from Maryland (Mr. *Cummings*) did not have to allow me this time, knowing that I oppose the bill, and I am extremely appreciative for that.

Mr. Speaker, I rise in strong opposition both to the process that has brought this bill to the floor under suspension of the rules and to the substance of the underlying bill, H.R. 2086, the reauthorization bill for the Office of National Drug Control Policy, the so-called Drug Czar's Office.

Mr. Speaker, why is this bill before us today under suspension of the rules with only 20 minutes of debate for each side and no opportunity for Members to offer amendments? Is there anyone who truly believes that this bill could not be improved if we had a full and fair debate on the many issues raised by H.R. 2068 and if Members had the opportunity to offer amendments to the bill?

The Director of the ONDCP manages a Federal drug control budget of almost \$20 billion. The Federal drug control budget for the last 5 fiscal years alone was almost \$100 billion. ONDCP is tasked with managing an enormous Federal drug control budget. What is the return on the investment? Where is the bang for our Federal dollars? Surely, something more than such cursory floor consideration is in order for these major issues.

The war on drugs is a joke. It is ineffective, and it is a waste of taxpayers' money. This money should be spent on prevention, treatment, and rehabilitation. During proceedings in the Committee on the Judiciary, I certainly tried to offer amendments to defund this program altogether. We need to start all over again.

Mr. Speaker, the nationwide prison inmate population today is about 2.1 million people, over 160,000 of them in my State of California alone. Many of the inmates are serving time for drug offenses. Nationwide, more than 40 percent of the prison population consists of African American inmates. About 10 percent of the African American men in their mid to late 20s are behind bars. In some cities, more than 50 percent of young African American men are under the supervision of the criminal justice system. Given the role of mandatory minimum sentencing for drug offenses in producing these statistics, we need to have a serious debate about the efficacy and soundness of the war on drugs and on mandatory minimum sentencing.

Mr. Speaker, Americans need real help in diverting their children from drug use. Families need rehabilitation to save and unite families. This so-called war on drugs is merely a joke, and I believe that we can do better.

Supreme Court Justice Anthony Kennedy observed in a major speech this summer to the annual meeting of the American Bar Association on mandatory minimum sentencing, he said, "Our resources are misspent." This is a Supreme Court Justice. "Our punishments too severe, our sentences too long. The Federal sentencing guidelines should be revised downward. I can accept neither the necessity nor the wisdom of Federal mandatory minimum sentencing. In too many cases, mandatory minimum sentences are unwise and unjust."

These task forces go out into these poor communities and find some misguided kid with one gram of crack cocaine. They spend all this time locking them up, taking them to court, getting mandatory minimum sentencing where they spend 5 years or more under mandatory minimum sentencing. The judge has no discretion. It does not make any difference whether they have ever been in trouble before. It does not make any difference that their families are good, they are professionals. The child makes one mistake. They are not cracking the big drug czars. They are not getting the people who are really responsible for putting the drugs on the streets. They will lock up anybody that they can easy so that they can get some more drug task force money.

I just had all the defendants here at the Congressional Black Caucus Foundation weekend from Tulia, Texas, where they arrested 10 percent of all of the African American men in the town of Tulia, Texas, arrested them on the testimony of one lying

guy, one man who was a part of the drug task force, the drug agent, Mr. Thomas Coleman, who is now, by the way, under indictment for his misconduct in Tulia. He just simply lied. And he went to the judge, no jury, they gave people sentences from anywhere from 4 or 5 years to 20 and 30 years. They had to take an army of pro bono lawyers from the big law firms and from the NAACP and from the ACLU to go out and get these sentences overturned. This is a joke, and it needs to be stopped.

[Time: 14:45]

Mr. SOUDER. Mr. Speaker, I yield myself 2 1/2 minutes.

Mr. Speaker, I wanted to clarify one of the matters from the gentlewoman from California (Ms. *Waters*) because under President Bush, in 2 straight years of requests, he has had larger increases in treatment than in supply reduction. And it is good to see that she at least agrees with the President and House leadership on that matter. While we may have other disagreements, we all agree that we need to focus increasing amounts on treatment.

I also wanted to clarify that the purpose of this particular bill and HIDTAs was to have these high-intensity drug treatment areas where local and State law enforcement could tap into the Federal law enforcement, so rather than just going after the user on the street, we could actually have local and State law enforcement move up through the system to find the networks, to try to get the major drug dealers. That has not stopped all the street-level arrests, but it has made differences in Los Angeles and in Indiana, where we now see us able to go up the chain and try to get the big people behind those who are abusing the people in our neighborhoods on the street.

I also would like to clarify one other thing that has been sent out to some offices that has some false information from one of the conservative groups that has a false allegation about the amount of money being spent in this bill. This bill is a freeze for the next 2 years. In the third, fourth and fifth year, there is a \$15 million increase in a \$1 billion bill.

We have worked hard to try to manage this financially, and it is incorrect to imply that this bill is anything other than a freeze for the next few years. I think the wording is confusing on the criticism.

Furthermore, it proposes to criticize the one major prevention program we have, the media campaign, because of an OMB study. We have addressed a number of the things in this bill that OMB has asked for which was more restrictions. The letter also confuses authorizing and appropriations bills and also has false data in it on whether the ad campaign has been effective. In fact, it is accurate, but there is a misleading thing. It implies, it says that the media campaign has been ineffective, but then in its wording says 'among certain age groups," meaning it has been effective in most categories with most drugs, but among a few it has not.

Therefore, they sent out a memo falsely implying that we increased the spending and falsely attacking the ad campaign, and that did not do this group justice which has been a great crusader for responsible spending.

Mr. Speaker, I reserve the balance of my time.

Mr. CUMMINGS. Mr. Speaker, I yield the balance of our time to the gentleman from California (Mr. *Waxman*), the ranking member of the Committee on Government Reform. The gentleman has worked very hard on this legislation, and I would like to thank him.

Mr. SOUDER. Mr. Speaker, I yield 1 minute to the gentleman from California (Mr. *Waxman*).

Mr. WAXMAN. Mr. Speaker, I thank the gentleman for yielding me time, the senior member on our subcommittee that handled this legislation.

Mr. Speaker, I want to thank the chairman of our committee and the ranking member of the subcommittee for the constructive way that this bill has been processed by our Committee on Government Reform.

The problem of drug abuse is a serious problem. This legislation reauthorizes the work at the Office of National Drug Control Policy. The introduced version of the bill had a number of

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problems which I am pleased that we were able to work through. It provided that the possibility that the media campaign could be used for partisan political purposes and imposed limitations on the funds that could be used by the drug czar for free media campaigns.

On a bipartisan basis, we changed that, and the bill now ensures that the media campaign cannot be used for partisan political activities, and it adds a new provision banning the use of the media campaign to advocate for or against a ballot initiative, draft legislation, or regulatory proposal.

We also struck controversial language allowing the director to take resources away from the States that have medical marijuana laws. We dropped language limiting the ability of the ONDCP to engage in nontraditional forms of outreach and education. We deleted language overturning a unanimous ruling of the FCC requiring ONDCP advertisements to be identified as paid for by the ONDCP. We made progress in requiring that 80 percent of the media campaign dollars must go to media buys. The present requirement is now 77 percent. I would prefer that there be no requirement at all, but I think this is an improvement.

We were able to address many problems during the committee process, and the result is a much better product. I want to point out that this bill is not a perfect bill. And one of the remaining problems concerns the use of HIDTA, the HIDTA funds, for treatment. Further work need to be done to address the need for more drug treatment, and I have talked to the gentleman from Indiana (Mr. *Souder*) about that matter. And based on his promise that we will continue to talk about it and look further at this issue, I am not going to oppose the bill on that basis. But I do hope that when the bill goes through to a conference or comes out of the Senate, that we will do more in the area of treatment.

Mr. Speaker, it is a bill that I urge my colleagues to support. I hope that we can work to make ONDCP even better in the future.

Mr. SOUDER. Mr. Speaker, how much time remains?

The SPEAKER pro tempore (Mr. *Whitfield*). The gentleman from Indiana (Mr. *Souder*) has 3 minutes remaining.

Mr. SOUDER. Mr. Speaker, I yield myself the balance of my time.

Mr. Speaker, I wanted to make sure that Members understood there was one program we have not talked about at all today which is CTAC, the Counter-Drug Technology Assessment Center, which has a technology transfer program that is so important to so many of our local and State programs; 5,356 local and State agencies across the United States have tapped into this technology.

I also wanted to point out for those who are somewhat confused about HIDTAs that, for example, in New York City, Detroit and Los Angeles, over half of the members of that HIDTA are local law enforcement and two-thirds are State and local law enforcement. This was a program that said rather than just have Federal law enforcement, let us build and leverage the resources of the State and local communities by working together.

If we do not adequately fund this program, every city has pretty much told us that they will pull out because they have to use their State and local dollars to join with these HIDTAs, and it is a very marginal decision to do so, but they believe putting two-thirds of the officers in has been beneficial in reducing crime in their area.

In New York City, the HIDTA there is referred to as the U.N. of law enforcement because after 9/11, they have consolidated not only the narcotics, but the anti-terrorism efforts to make sure that New York remains safe because it has been on orange alert since 9/11. It is on orange alert when the rest of us are on elevated alert. And to cut back the HIDTA, or eliminate the HIDTA, in New York City would be devastating to anti-terrorism protection as well.

Lastly, I want to point out that I have had excellent discussions with the ranking member, the gentleman from Maryland (Mr. *Cummings*) and with the ranking member of the full committee, the gentleman from California (Mr. *Waxman*). We have continued to

disagree, but understand that we need to work out some kind of additional language that gives flexibility on drug treatment, although that should not be the primary function, and HIDTA dollars should not be used for that effect. We continue to talk about the grandfathering in of the two programs that are not grandfathered in under this and if, whether that money could be used like it is in the Washington-Baltimore HIDTA to work on drug treatment, and I pledged that I would continue to work on this as we move through conference.

So I hope that given the many changes, this bill makes a very strong statement to drug dealers across America, that we are not going to back off. It makes a very strong statement on marijuana use and the dangers of marijuana. It talks about how to tighten the Safe and Drug-Free Schools program to make sure it has a clear anti-drug message. It includes efforts to make sure that the HIDTAs focus on national drug trade and not just at the local level where we lock people up but how do we get into the systems. On the supply side, we have also asked for new assessments on the accelerating problem of Columbian heroine.

I believe that in the end this bill represents a bipartisan approach to a balanced, coordinated and effective strategy to address the serious problem of drug abuse and its many effects across our country. I urge all Members to support H.R. 2086.

• [Begin Insert]

Mr. PORTMAN. Mr. Speaker, I rise today in support of H.R. 2086, the Office of National Drug Control Policy Reauthorization Act of 2003. This legislation also reauthorizes the National Youth Anti-Drug Media Campaign--a critical component of our Nation's drug control strategy.

We know that one important way to get the drug prevention message across is through the media: television, radio and newspapers. I am a firm believer that an effective media campaign can help prevent and delay the onset of substance abuse among youth. The Partnership for a Drug-Free America operated a successful media campaign long before the Federal Government became involved. Congress understood the importance of the anti-drug media message and wanted to ensure that it would continue as public service campaigns have the proven ability to change attitudes and behavior.

Since 1998, the Office of National Drug Control Policy has run a National Youth Anti-Drug Campaign. With the help of the Partnership for a Drug-Free America, the Campaign has created more than 200 commercials.

We know that the Media Campaign is working. The Media Campaign helps parents realize that they play a vital role in preventing their kids from using drugs. Results clearly show that the Campaign helps initiate conversations about substance abuse between parents and their children. We also know that the ads have helped parents set rules and clear standards about drug use.

Survey results released this month confirm that youth are getting the right messages about drug use. The ads have contributed to a climate of disapproval of drug use that is imperative to reducing the human, social, and financial costs of this deadly disease. The Campaign reaches 90 percent of the youth audience 4 times a week; and 74 percent of the parent audience 3.5 times a week.

Drug use behaviors are beginning to show positive effects from youth exposure to the Media Campaign. For example, almost half (49 percent of youth with high exposure to the marijuana ads said the ads made them less likely to try or use drugs versus 38 percent of the youth who had little or no exposure to the ads. A strong correlation was found between high exposure to the ads and increased perceptions of risk associated with marijuana use that have been specifically highlighted by the Campaign. Recent data also indicates that kids who see or hear anti-drugs ads at least once a day are less likely to do drugs than other adolescents who don't see or hear ads frequently.

I have seen first-hand in my own community the positive results that can be gained through an effective media campaign.

The Coalition for a Drug-Free Greater Cincinnati, which I founded, recently conducted a survey that showed a decline in teen drug use in our region for the first time in 12 years. Marijuana use by teens is down 13 percent, alcohol use is down 24 percent, and cigarette use is down 28 percent.

The media component of the community coalition in Cincinnati plays a critical role in the coalition's overall success. The Coalition helps run an extensive local media campaign through television, radio and print. In fact, the local media in southwest Ohio have generously donated over \$1 million in anti-drug ads on an annual basis for the last three years. The survey data tells us that the media campaign is helping bring these numbers down.

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Based on our survey, kids who have seen anti-drug ads on a regular basis are 20 percent less likely to use drugs. These results indicate that prevention and education tools like the media campaign work.

The key is that we work together--on a bipartisan basis--to keep these ads on the air as part of a comprehensive drug prevention effort. Passage of this bill, the Reauthorization of the Office of National Drug Control Policy, will help to improve the effectiveness of the media campaign and the reduction of drug abuse among our Nation's adolescents. I encourage all of my colleagues to support this legislation.

Ms. JACKSON-LEE of Texas. Mr. Speaker, I rise in support of this legislation as amended in a markup session before the Judiciary Committee.

The Office of National Drug Control Policy (ONDCP) has been the leader of federal drug policy in the United States since its inception in 1988. The Director of ONDCP serves as the President's primary advisor for drug control policy and has responsibility for

implementing the ONDCP's mission of coordinating the Nation's efforts to reduce the use, manufacture, and trafficking of illicit drugs and reducing the associated crime, violence, and health consequences of illicit drugs. The Director is also responsible for advising the President on national and international drug control policies and strategies, formulating the National Drug Control Strategy, reviewing and certifying the budgets of National Drug Control Program Agencies, and for ensuring that federal drug programs are adequately funded. The Director reviews the annual budget request for each federal department and agency charged with implementing a federal drug control program and is empowered to set forth funding requirements and initiatives that he or she believes are sufficient to meet those goals.

Given the ongoing problem of drug trafficking, use, and addiction in our country, the importance of reauthorizing the ONDCP is obvious. However, as we consider funding this important federal office, it is necessary to ensure that federal funds are allocated to the proper programs.

As it is presently drafted, H.R. 2086 directly undermines the use of important tools such as drug prevention and treatment programs that have been proven to considerably reduce the use of unlawful drugs. For example, ONDCP designates certain cities in America particularly burdened by narcotics as High Intensity Drug Trafficking Areas (HIDTA). Under the provisions of the bill, HIDTA program participants are prohibited from using any of the funds they receive on prevention or treatment. The only HIDTA excluded from this prohibition is the Baltimore/Washington HIDTA.

In addition to the HIDTA prohibitions, H.R. 2086 inadequately advances prevention and treatment programs by failing to require the Director to certify, prior to approval of the budget, that federal drug treatment program funding is adequate. For instance the Department of Health and Human Services implements several drug treatment and prevention programs, such as the Substance Abuse Prevention and Treatment and Block Grant Program and the Targeted Capacity Expansion grant program. Under H.R. 2086, the Director is not required, as part of the National Drug Control Program budgeting process, to certify adequate funding of these programs prior to approval of the budget.

Another flaw in H.R. 2086, is the failure to break down statistical data by demographic group. The provisions of the bill include annual reporting requirements but the current provisions fail to include language that would require ONDCP to conduct and assess state and federal prevention and treatment programs to ensure the unique needs of minority groups, women, and youths are met. In addition, the reporting provisions fail to require that the drug-related crime information is required to be reported broken down by racial, ethnic, age, and gender lines. This information is useful to guarantee that the populations most affected by illicit drug use are allocated the greatest resources, to determine which localities to certify as HIDTAs, and to determine disparate treatment by law enforcement officials.

The ONDCP is a vital federal resource for minimizing the impact of drug crime and use in America. It is important to ensure that the ONDCP is authorized past its September 30,

2003 expiration date. However, we must not be hasty in reauthorizing the ONDCP. We must ensure that the reauthorization bill will allocate ONDCP resources to treatment and prevention programs as readily as law enforcement programs. We must ensure that there is data reporting that gives a thorough picture of our drug control efforts.

Mr. Speaker, I support the efforts of the ONDCP and believe it is important that my colleagues pass this legislation to authorize this federal agency to continue its mission. However, the flaws in H.R. 2086 must be corrected. I hope that all amendments that propose to address these flaws offered today will be given full consideration.

• [End Insert]

Mr. SOUDER. Mr. Speaker, I yield back the balance of my time.

The SPEAKER pro tempore. The question is on the motion offered by the gentleman from Indiana (Mr. *Souder*) that the House suspend the rules and pass the bill, H.R. 2086, as amended.

The question was taken; and (two-thirds having voted in favor thereof) the rules were suspended and the bill, as amended, was passed.

A motion to reconsider was laid on the table.

END